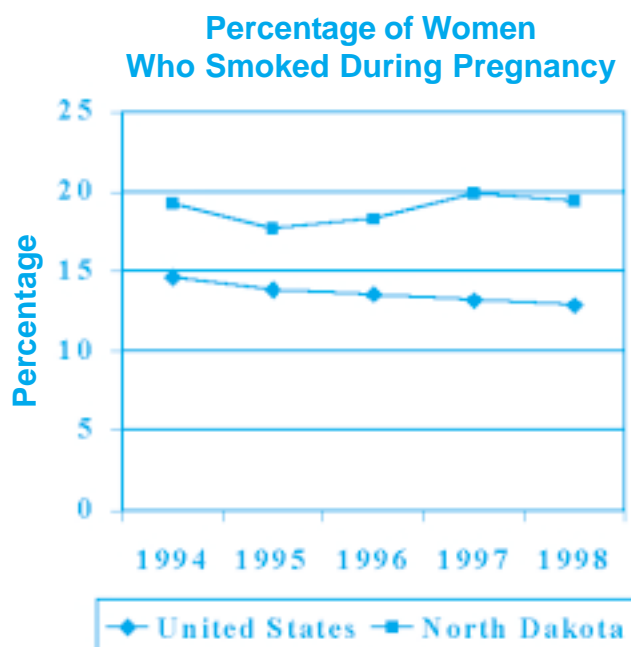


Smoking and Pregnancy

Maternal and Child Health Fact Sheet

The Problem

Between 1994 and 1998, the percentage of women in North Dakota who smoked during pregnancy was higher than for women in the United States overall. In fact, the national percentage has decreased while the North Dakota percentage has increased.



North Dakota Statistics ~ 1994 Through 1998

- Teenage mothers ages 15 through 19 were more likely to smoke during pregnancy than mothers ages 20 and older. (Ages 15 through 19 – 32 percent; ages 20 and older – 17.5 percent.)
- Native American mothers were more likely to smoke while pregnant than White mothers. (Native American – 40.2 percent; White – 16.7 percent.)
- Of all mothers who reported smoking while pregnant, less than 20 percent quit during their first trimester.
- Babies born to mothers who smoked were three times as likely to be born to a single mother than were babies born to mothers who did not smoke. (Single mothers who smoked – 38.7 percent; married mothers who smoked – 12.4 percent.)

The Effects

Smoking during pregnancy is linked to low birth weight, preterm delivery, Sudden Infant Death Syndrome (SIDS), and respiratory problems in newborns.

North Dakota Statistics

- Mothers who did not stop smoking in their first trimester were more likely to gain less weight than recommended during pregnancy than did mothers who never smoked or who quit smoking during the first trimester.
- Between 1994 and 1998, 27.6 percent of mothers who gave birth to low birth weight babies smoked during their pregnancy, compared to 18.4 percent of mothers whose babies were born at a healthy weight.
- According to the 1999 *New Mother's Survey*, a woman was more likely to stop smoking during pregnancy if she received professional advice from a health care provider about the harmful effects that smoking has on her baby.
- Eight percent of mothers indicated they smoked in the presence of their babies. Thirty percent of babies were exposed to secondhand smoke from friends, relatives, babysitters and day-care providers.

Data Sources:

- National Center for Health Statistics
- Centers for Disease Control and Prevention
- North Dakota Department of Health, Division of Vital Records
- 1999 *New Mothers' Survey*, North Dakota Department of Health, Division of Maternal and Child Health

The Response

The North Dakota Department of Health, Division of Maternal and Child Health, has developed a workplan to address the issue of tobacco use by pregnant women. The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and the Optimal Pregnancy Outcome Program will monitor tobacco use by their clients and will provide them with smoking cessation-related information. In addition, the division will partner with the state's Tobacco Control Program to develop a public information campaign and will add tobacco exposure/use questions to forms used by public health.



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